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CONFIRMATION NO. 3007

<b>SERIAL NUMBER</b> 10/516,423	<b>FILING OR 371(c) DATE</b> 07/25/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> ASZD-P01-708
<b>APPLICANTS</b> Susanna Abrahmsen Alami, Molndal, SWEDEN; Tord Inghardt, Molndal, SWEDEN; Anders Magusson, Molndal, SWEDEN; Carl-Gustaf Sigfridsson, Molndal, SWEDEN; Mikael Thune, Molndal, SWEDEN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/SE03/00857 05/27/2003				
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0201658-2 05/31/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 11 <b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 28120				
<b>TITLE</b> Immediate release pharmaceutical formulation				
<b>FILING FEE RECEIVED</b> 1240	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	